

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Daniel</i>		04-05-01
O.I.P.E. CLASSIFIER		59	531
FORMALITY REVIEW	H.T.	913	06/01/01
RESPONSE FORMALITY REVIEW	<i>Y</i>	905	9/19/01

INDEX OF CLAIMS

☒ Rejected
☐ Allowed
☐ (Through numeral) Canceled
☐ Restricted
☐ Non-elected
☐ Interference
☐ Appeal
☐ Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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AL
6/2
50-481
9-17-01